
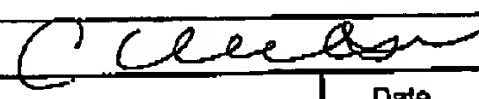


TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/597,891	RECEIVED CENTRAL FAX CENTER JUN 08 2006
	Filing Date	June 19, 2000	
	First Named Inventor	Hendricks	
	Art Unit	2611	
	Examiner Name	Koenig	
Total Number of Pages in This Submission	30	Attorney Docket Number	SEDN/5314

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Please charge these fees to Deposit Account No. 20-0782 - 1-month extension of time - \$120 Also, if necessary, charge any additional fee(s) or underpayments of fee(s) to Account No. 20-0782.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Patterson & Sheridan, LLP		
Signature			
Printed Name	Eamon J. Wall		
Date	6/8/06	Reg. No.	39,414

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Typed or printed name	C. Wilson	Date	6/8/06


This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

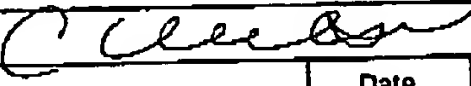
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JUN 08 2006

PATENT APPLICATION

Applicants: John S. Hendricks et al.

Case: 5314 (SEDN/5314)

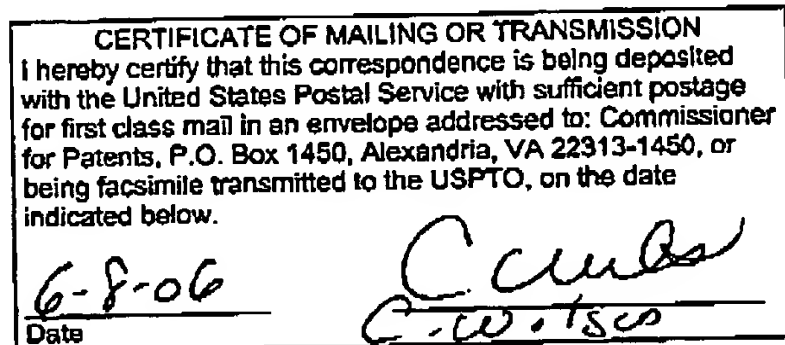
Serial No.: 09/597,891

Examiner: Andrew Y. Koenig

Filed: 6/19/00

Group Art Unit: 2611

Confirmation #: 5541

Title: APPARATUS AND METHOD FOR PACKAGING PROGRAMS IN A
TELEVISION PROGRAM DELIVERY SYSTEMMAIL STOP AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SIR:

RESPONSE UNDER 37 CFR §1.111

In response to the non-final Office Action mailed February 8, 2005, please
reconsider the above-identified patent application as follows.

The Commissioner is authorized to charge any fees due, including extension of
time and excess claim fees, to counsel's Deposit Account No. 20-0782/SEDN/5314.